

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.J.P.E. CLASSIFIER		10	12-13-01
FORMALITY REVIEW	L C	1024	12-19-01
RESPONSE FORMALITY REVIEW	MTB	94	5-20-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected.  
 □ ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 × ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/16/01
2	✓	✓	4/11/01
3	✓	✓	9/16/01
4	✓	✓	5/16/01
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
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If more than 150 claims or 10 actions  
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Claim	Final	Original	Date
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 GEG - TCS/TC  
 11/9/01  
 05-2102